| PATENT APPLICATION FEE DETERMINATION RECORD   |  |   |                  |              |                                 |                  |    |                   | Application or Docket Number |     |                     |                        |  |
|---|--|---|------------------|--------------|---------------------------------|------------------|----|-------------------|------------------------------|-----|---------------------|------------------------|--|
| Effective October 1, 2004   |  |   |                  |              |                                 |                  |    |                   | 10/516797                    |     |                     |                        |  |
| CLAIMS AS FILED - PART I  |  |   |                  |              |                                 |                  |    | IALL EN           |                              |     |                     |                        |  |
| (Column 1) (Column  |  |   |                  |              |                                 |                  |    | PE                |                              | OR  | OTHER<br>SMALL      | ENTITY                 |  |
| ΤΟΊ   | TAL CLAIMS                                     |   |                  |              |                                 |                  |    | RATE              | FEE                          |     | RATE                | FEE                    |  |
| FOR   |  |   | NUMBER FILED NUI |              |                                 | BER EXTRA        | B/ | SIC FEE           |                              | OR  | BASIC FEE           | 951                    |  |
| TOTAL CHARGEABLE CLAIMS   |  |   | minus 20 = .     |              |                                 | / ,              |    | (\$9=             |                              | OR  | X \$ 18 =           | 100                    |  |
| INDE  | EPENDENT CL                                    | AIMS                                      | / minus 3 = .    |              |                                 | X\$44            |    | \$ 44 =           |                              | OR  | X \$ 88 =           |                        |  |
| MUL   | TIPLE DEPENI                                   | DENT CLAIM P                              | RESENT .         |              |                                 |                  | +  | \$ 150 =          |                              | OR  | + \$ 300 =          |                        |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2 TOTA                       |  |   |                  |              |                                 |                  |    | TOTAL.            |                              | OR  | TOTAL               | 757                    |  |
| CLAIMS AS AMENDED - PART II   |  |   |                  |              |                                 |                  |    |                   |                              | •   | OTHER               | THAN                   |  |
|   | ,  | (Column 1)                                |                  |              |                                 | (Column 3)       | :  | SMALL             | ENTITY                       | OR  | SMALL               |                        |  |
| AMENDMENT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                  | NUM<br>PREVI | HEST<br>MBER<br>MUSLY<br>D FOR  | PRESENT<br>EXTRA |    | RATE              | ADDI-<br>TIONAL<br>FEE       |     | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  | *   | Minus            | ••           |                                 | =                | >  | (\$9=             |                              | OR  | X \$ 18 =           |                        |  |
|   | Independent                                    | •   | Minus            | ***          |                                 | =                | х  | \$ 44 =           |                              | OR  | X \$ 88 =           |                        |  |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                  |              |                                 |                  |    | \$ 150 =          |                              | OR  | + \$ 300 =          | <del></del> -          |  |
|   |  |   | -                |              |                                 |                  |    | TOTAL<br>OUT. FEE |                              | OR. | TOTAL<br>ADDIT, FEE | <del></del> -          |  |
|   | (Column 1) (Column 2) (Column 3)               |   |                  |              |                                 |                  |    |                   |                              |     |                     |                        |  |
| AMENDMENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | ·                | NUI<br>PREV  | HEST<br>MBER<br>TOUSLY<br>D FOR | PRESENT<br>EXTRA |    | RATE              | ADOI-<br>TIONAL<br>FEE       |     | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  | <u> </u>                                  | Minus            | **           |                                 | =                | ,  | <b>(\$9</b> =     |                              | OR  | X \$ 18 =           |                        |  |
|   | Independent                                    | *   | Minus            | ***          |                                 | =                | х  | \$ 44 =           |                              | or  | X \$ 88 =           |                        |  |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                  |              |                                 |                  |    | \$ 150 =          |                              | OR  | + \$ 300 =          |                        |  |
| TOTAL<br>ADOIT. FEE   |  |   |                  |              |                                 |                  |    |                   |                              | OR  | TOTAL<br>ADDIT, FEE |                        |  |
|   | (Column 1) (Column 2) (Column 3)               |   |                  |              |                                 |                  |    |                   |                              |     |                     |                        |  |
| AMENDMENT C   |  | CLAMS REMAINING AFTER AMENDMENT           |                  | PREV         | HEST<br>MBER<br>MOUSLY<br>D FOR | PRESENT<br>EXTRA |    | RATE              | ADDI-<br>TIONAL<br>FEE       |     | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  | •   | <b>M</b> enus    | **           |                                 | =                | [; | <b>x \$ 9 =</b>   |                              | OR  | X \$ 18 =           |                        |  |
|   | Independent                                    | •   | Minus            | ***          |                                 | =                | X  | \$ 44 =           |                              | OR  | X \$ 88 =           | _                      |  |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                  |              |                                 |                  |    | \$ 150 =          |                              | OR  | + \$ 300 =          | 2                      |  |
| TOTAL ADDIT. FEE  If the entry in column 1 is less than the entry in column 2 write "0" in column 3 |  |   |                  |              |                                 |                  |    |                   |                              | OR  | TOTAL<br>ADDIT, FEE |                        |  |

<sup>\*\*</sup> If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20",

<sup>\*\*\*</sup> If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1,